



JACK O'CONNELL
State Superintendent of Public Instruction

**CALIFORNIA
DEPARTMENT
OF
EDUCATION**

1430 N Street

P.O. Box 944272

Sacramento, CA

94244-2720

APPOINTMENTS APPLICATION FORM

1. Mr.
Mrs.
Ms. _____
First Middle Last
2. Appointment(s) Sought:
1) _____
2) _____
3) _____
3. Driver's License or Identification Card #: _____
4. Date of Birth: _____
5. Local Hometown News Paper: _____
6. If married, name of spouse: _____
7. Residence Address: _____

City County State Zip
Phone () _____ FAX () _____ E-mail: _____
8. Sex: (M) (F) _____

9. Business Title: _____

Company:

Address: _____

City	County	State	Zip
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Phone () Fax () E-mail:

Pager () Cellular () Emergency # ()

10. Are you a registered Voter? Yes No

11. Ethnicity (optional)

12. Party Affiliation (optional)_____

13. Please attach a resume with this application.

14. ____ Yes ____ No Are you a citizen of a country other than the United States?
If so, please list country.

15. ___ Yes ___ No Have you or your immediate family been affiliated (as an officer, owner, director, trustee, partner, advisor, or consultant) with any institutions (corporations, firms, partnerships, business enterprises, nonprofit organizations, etc.) within the past five years which might present a potential conflict of interest with your requested appointment? If yes, please explain.

16. Yes No Are you currently or have you ever been involved in civil litigation, undergone investigation or been convicted of a violation of any federal, state, county or municipal law, regulation or ordinance? (Traffic violation for which a fine of less than \$100 was imposed should not be included.) If yes, please explain.

17. ____ Yes ____ No Has a tax lien or other collection procedure ever been instituted against you by a federal, state, or local authorities? If yes, please explain.

18. ___ Yes ___ No Have you ever been disciplined or cited for a breach of ethics or unprofessional conduct by, or been the subject of a complaint to any court, administrative agency, professional association, disciplinary committee or other professional group. If yes, please explain.

19. Yes No Have you ever run for political office, served on a political committee, or been identified publicly with a particular political organization, candidate or issue? If yes, please explain.

20. —Yes—No Have you ever written any books or articles? If yes, please explain.

21. ____ Yes ____ No Is there anything in your background which, if made known to the general public through your appointment, would cause embarrassment to you and/or the Department of Education? If yes, please explain in full detail.

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize any person or other entity in possession of information regarding any of the following to release that information to the California Department of Education.

Education
Employment
Drivers License Record
California State Summary Criminal History Information

I authorize the California Department of Education to use information obtained pursuant to this release for any purpose relating to the Department of Education's review and deliberation concerning my nomination to public office, including, but not limited to, its use by the State Superintendent of Public Instruction, and Department of Education.

This authorization is valid for one year following the date of the signature below.

(Signed) _____ (Date) _____